

TRANSCRIPT ORDER

DUE DATE:

Please Read Instructions:

1. NAME William S. Helfand		2. PHONE NUMBER (832) 460-4614		3. DATE 10/12/2022	
4. DELIVERY ADDRESS OR EMAIL bill.helfand@lewisbrisbois.com		5. CITY Houston		6. STATE TX	7. ZIP CODE 77046
8. CASE NUMBER 4:22-cv-03279	9. JUDGE Hon. Keith P. Ellison		DATES OF PROCEEDINGS		
		10. FROM 10/6/2022	11. TO 10/6/2022		
12. CASE NAME Lewis Brisbois Bisgaard and Smith LLP v. Michael Joseph I		LOCATION OF PROCEEDINGS			
		13. CITY Houston	14. STATE TX		
15. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input checked="" type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CIVIL		<input type="checkbox"/> BANKRUPTCY	
		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER	

16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			
<input type="checkbox"/> OPINION OF COURT			
<input type="checkbox"/> JURY INSTRUCTIONS		<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING		Hearing with Judge Ellison	10/6/2022
<input type="checkbox"/> BAIL HEARING			

17. ORDER

CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
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EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
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HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			

CERTIFICATION (18. & 19.)

By signing below, I certify that I will pay all charges (deposit plus additional).

ESTIMATE TOTAL

0:00

18. SIGNATURE

19. DATE

10/12/2022

PROCESSED BY

PHONE NUMBER

TRANSCRIPT TO BE PREPARED BY

COURT ADDRESS

ORDER RECEIVED

DATE

BY

DEPOSIT PAID

DEPOSIT PAID

TRANSCRIPT ORDERED

TOTAL CHARGES

0:00

TRANSCRIPT RECEIVED

LESS DEPOSIT

0:00

ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT

TOTAL REFUNDED

PARTY RECEIVED TRANSCRIPT

TOTAL DUE

0:00

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ORDER RECEIPT

ORDER COPY